

FOCUS

Shalala Invites the Public's Input In Developing Healthy People 2010

Health and Human Services Secretary Donna E. Shalala is urging all Americans to help develop national health objectives for the coming decade by commenting on *Healthy People 2010 Objectives: Draft for Public Comment*. The draft publication, released in September, proposes more than 500 national objectives for improving the health of Americans by the year 2010.

"At a time when consumers are expressing an unprecedented interest in decisions related to their health, our call for citizen involvement is especially fitting. To make Healthy People 2010 a success, we need to hear the ideas and the concerns of the American people," according to the Secretary.

"The Healthy People initiative has defined the Nation's health agenda for the last two decades," Shalala added. "It identifies the most significant opportunities to improve health and focuses public and private sector efforts on those areas."

Healthy People objectives are based on the best scientific knowledge and are used for decisionmaking and for action. By identifying opportunities to improve the health of all Americans, Healthy People helps drive action toward common health improvement goals.

Healthy People 2010 proposes two overarching goals: to increase quality and years of healthy life and to eliminate health disparities. The draft objectives are organized by four sections: promote healthy behaviors; promote healthy and safe communities; improve systems for personal and public health; and prevent and reduce diseases and disorders. The sections are further organized into 26 focus area chapters.

Public comment on the goals, focus areas, and draft objectives will be accepted until 5 p.m. on December 15, 1998. A Healthy People 2010 web site enables the public to view and comment on the document electronically at <http://web.health.gov/healthypeople>. Written comments may be sent to the Office of Disease Prevention and Health Promotion (ODPHP), Attention: Healthy People

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SPOTLIGHT

Disparities and Health

The comment draft of Healthy People 2010 sets a goal of eliminating health disparities by race, ethnicity, age, gender, income, and disability status. Prior to each regional public hearing, discussions on this critical issue are helping to focus attention on the opportunities and challenges involved in attaining this goal. At the Philadelphia meeting, for example, presentations by the Principal Deputy Assistant Secretary for Health, senior staff from the Office of Minority Health, and local representatives were followed by substantive exchanges with the public.

The HHS Initiative to Eliminate Racial and Ethnic Disparities in Health provides a related opportunity to develop strategies and implementation plans in six specific health areas: infant mortality, cancer screening and management, cardiovascular disease, diabetes, HIV/AIDS, and immunizations. Community involvement is considered essential for effective interventions. For more information about this initiative, visit <http://raceandhealth.hhs.gov>.

For details about the public hearings, visit the Healthy People 2010 web site at <http://web.health.gov/healthypeople> or call 1-800-367-4725.

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2010 Objectives, Hubert H. Humphrey Bldg., Room 738G, 200 Independence Avenue, SW., Washington, DC 20201. A disk will facilitate posting of paper comments to the web site.

In a cover letter accompanying the Healthy People 2010 objectives, Surgeon General David Satcher said, “Thousands of people contributed to the process of putting together these draft objectives. The subjects addressed embody the commitment of many dedicated people working in health care services, public health, community settings, schools, and worksites—and average American health care consumers. Many thousands more will put these objectives into practice in the coming decade. For these reasons, it is important for this draft to receive careful and critical review.”

Because the objectives will help mobilize energy and resources to make measurable health improvements by 2010, the public comment phase is crucial. “I would urge the public to let your voice be heard this fall and participate in drafting 2010 objectives that will shape the Nation’s health agenda and guide national health improvement into the 21st century,” said Satcher.

As of press time, three **public hearings** on the proposed 2010 initiative had been held—in Philadelphia, New Orleans, and Chicago—and three more scheduled—in Washington, DC, November 13; Seattle, December 2-3; and Sacra-

mento, December 9-10. The Washington, DC, hearing will be held as part of the annual Healthy People Consortium meeting. The Consortium is an alliance of more than 370 national membership organizations and 271 State and territorial public health, mental health, substance abuse, and environmental agencies.

For more information on these meetings, go to <http://web.health.gov/healthypeople>.

Print copies of the Healthy People 2010 objectives may be ordered by calling the ODPHP fax-back system at (301) 468-3028. For further information about Healthy People, the Healthy People Consortium, or the public hearings, please visit the web site or call (800) 367-4725.

The origin of Healthy People is the 1979 Surgeon General’s report on health promotion and disease prevention—also titled *Healthy People*. The foreword to that report states boldly that its purpose is to “encourage a second public health revolution in the history of the United States...” and it urges that the Nation’s health strategy “be dramatically recast to emphasize the prevention of disease.” Healthy People 2010 continues the tradition of encouraging public participation in establishing national health goals. Healthy People is a framework for monitoring our progress and motivates action to improve the Nation’s health.

Healthy People 2000, which was released in 1990, is a comprehensive agenda with 319 objectives orga-

nized into 22 priority areas. The overarching goals are to increase years of healthy life, reduce disparities in health among different population groups, and achieve access to preventive health services. Healthy People 2000 was built on comments from more than 10,000 individuals and organizations. Ongoing involvement is ensured through the Healthy People Consortium.

To date, 47 States, the District of Columbia, and Guam have developed their

own Healthy People plans. Most States have emulated national objectives, tailoring them to their specific population needs. Within the Federal Government, Healthy People provides a framework for measuring performance. It is a strategic management tool that is being used by both the public and private sectors. Success is measured by positive changes in health status or reductions in risk factors, as well as improved provision of prevention services.

Healthy People 2010 Focus Areas

Promote Healthy Behaviors

1. Physical Activity and Fitness
2. Nutrition
3. Tobacco Use

Promote Healthy and Safe Communities

4. Educational and Community-Based Programs
5. Environmental Health
6. Food Safety
7. Injury/Violence Prevention
 - a. Injuries That Cut Across Intent
 - b. Unintentional Injuries
 - c. Violence and Abuse
8. Occupational Safety and Health
9. Oral Health

Improve Systems for Personal and Public Health

10. Access to Quality Health Services
 - a. Preventive Care
 - b. Primary Care
 - c. Emergency Services
 - d. Long-Term Care and Rehabilitative Services
11. Family Planning
12. Maternal, Infant, and Child Health
13. Medical Product Safety
14. Public Health Infrastructure
15. Health Communication

Prevent and Reduce Diseases and Disorders

16. Arthritis, Osteoporosis, and Chronic Back Conditions
17. Cancer
18. Diabetes
19. Disability and Secondary Conditions
20. Heart Disease and Stroke
21. HIV
22. Immunization and Infectious Diseases
23. Mental Health and Mental Disorders
24. Respiratory Disease
25. Sexually Transmitted Diseases
26. Substance Abuse

IN THE LITERATURE

Crosscutting

An Evidence-Based Approach to Interactive Health Communication: A Challenge to Medicine in the Information Age.

T.N. Robinson, et al. *Journal of the American Medical Association* 280 (October 14, 1998): 1264-69.

A rigorous evaluation framework for interactive health applications can help improve the quality and efficacy of online resources and standalone products.

Access to Health Information and Support: A Public Highway or a Private Road?

T.R. Eng, et al. *Journal of the American Medical Association* 280 (October 21, 1998): 1371-75.

Given the potential benefits of health information technologies, a goal of universal access to health information and support is needed to reduce disparities between "haves" and "have nots."

Effect of an Intensive Educational Program for Minority College Students and Recent Graduates on the Probability of Acceptance to Medical School.

J.C. Cantor, et al. *Journal of the American Medical Association* 280 (September 2, 1998): 772-76.

Summer enrichment programs for minority premedical students can increase the likelihood of their acceptance to medical school.

Physical Activity and Fitness

A Randomized Walking Trial in Postmenopausal Women: Effects on Physical Activity and Health 10 Years Later.

M.A. Pereira, et al. *Archives of Internal Medicine* 158 (August 10/24, 1998): 1695-1701.

Long-term exercise compliance with a walking intervention may produce health benefits in postmenopausal women.

Can Inexpensive Signs Encourage the Use of Stairs? Results from a Community Intervention.

R.E. Andersen, et al. *Annals of Internal Medicine* 129 (September 1, 1998): 363-69.

Basic health- and weight-related signs can increase the use of stairs versus escalators among shoppers in the United States.

Nutrition

Outcomes of a High School Program to Increase Fruit and Vegetable Consumption: Gimme 5—A Fresh Nutrition Concept for Students.

T.A. Nicklas, et al. *Journal of School Health* 68 (August 1998): 248-53.

Dietary habits of high school students can be influenced by positive media messages, increased exposure to a variety of tasty products, and minimal classroom activity.

Patients Report Positive Nutrition Counseling Outcomes.

M.R. Schiller, et al. *Journal of the American Dietetic Association* 98 (September 1998): 977-82. Because patient nutrition counseling has positive outcomes, key counseling points should be introduced or reinforced in inpatient settings, in conjunction with pre- and/or post-hospitalization care.

Tobacco

Use and Cost Effectiveness of Smoking Cessation Services Under Four Insurance Plans in a Health Maintenance Organization.

The New England Journal of Medicine 339 (September 1998): 673-79. A fully covered smoking cessation program that includes nicotine replacement therapy and behavioral modification will achieve greater smoking cessation rates than partially covered services.

Adolescents and Young Adults

The Prevalence of Homelessness Among Adolescents in the United States.

American Journal of Public Health 88 (September 1998): 1325-29. Homeless youths constitute a high-risk population that requires the immediate attention of policymakers.

Youths Reporting Homeless Episodes*

Location of Homeless Episodes	Proportion of the Sample, %	Estimated Number of the National Population
Youth or adult shelter	3.3	672,191
Public place	2.2	461,133
Abandoned building	1.0	206,592
Outside	2.2	454,573
Underground	0.4	87,882
Stranger's home	1.1	217,454
Any	7.6	1,567,043

*Proportion of youths aged 12 to 17 years reporting homeless episodes of at least one night's duration within previous 12 months: Youth Risk Behavior Survey, 1992-1993 (n=6,496)

Educational and Community-Based Programs

Using Picture Identification for Research with Preschool Children.

D.C. Wiley and C.M. Hendricks. *Journal of School Health* 68 (August 1998): 227-30. Picture identification can be effectively used to determine a preschool child's level of health knowledge, skill, or behavior.

Maternal and Infant Health

Intrauterine Growth Retardation: Identification and Management.

D. Peleg, et al. *American Family Physician* (August 1998): 453-64. Identification of intrauterine growth retardation is crucial because proper evaluation and management can result in a favorable outcome.

Meetings

National STD Prevention Conference. Dallas, TX. Sponsored by the Centers for Disease Control and Prevention. For information, call (404) 639-8260. **December 6-9, 1998.**

The Psychology of Health, Immunity & Disease: The National Institute for the Clinical Application of Behavioral Medicine 10th International Conference. Hilton Head, SC. For information, call (800) 743-2226. **December 7-13, 1998.**

13th Annual San Diego Conference on Responding to Child Maltreatment. San Diego, CA. For information, call (619) 495-4940, fax (619) 974-8018, or e-mail rwebb@chsd.org. **January 25-29, 1999.**

Prevention 99: Scientific, Political and Social Priorities for the 21st Century. Washington, DC. Sponsored by the American College of Preventive Medicine and the Association of Teachers of Preventive Medicine. For information, call (202) 466-2569, fax (202) 466-2662, e-mail prevention@acpm.org, or visit www.prevention-meeting.org. **March 18-21, 1999.**

38th International Congress on Alcohol and Drug Dependence. Vienna, Austria. For information, write ICAA, Case Postale 189, 1001 Lausanne, Switzerland; call (+41-21) 320-98-65; fax (+41-21) 320-98-17; e-mail icaa@pingnet.ch; or visit www.icaa.ch. **August 16-20, 1999. Deadline to submit abstracts: March 30, 1999.**

Online

Crosscutting

Partnership for Prevention
Today's Solution for Tomorrow's Health

Partnership for Prevention has a new web site at www.prevent.org. In addition to news and information about the Partnership, the site links to the Healthy People Business Advisory Council, which recently launched a quarterly **newsletter that informs businesses about national health promotion and disease prevention objectives.** For more information about the Business Advisory Council, write Partnership for Prevention, 1233 20th Street, NW., Suite 200, Washington, DC 20036; call (202) 833-0009; or visit the web at http://www.prevent.org/HP_Home.htm.

A new web site, <http://raceandhealth.hhs.gov>, provides information about the Department of Health and Human Services (HHS) **Initiative to Eliminate Racial and Ethnic Disparities in Health.** The site has an e-mail address for feedback and comment.

The Consumer Information Center's new **fall 1998 Consumer Information Catalog** is available at www.pueblo.gsa.gov. It lists more than 200 free and low-cost publications.

Heart Disease and Stroke

The National Heart, Lung, and Blood Institute has launched a new interactive web site, www.prime-web.com/chd, which

provides information on ways people with heart disease can lower their cholesterol.

Cancer

cancerTrials

cancerTrials™, sponsored by the National Cancer Institute (NCI), is a new online resource for information on studies of cancer treatment. The address is <http://cancertrials.nci.nih.gov>.

Adolescents and Young Adults

The Reality Clock is a feature of the Bureau For At-Risk Youth web site at <http://www.at-risk.com>. It provides up-to-the-minute statistics since January 1, 1998, on school violence, teen pregnancy, underage smoking, drug and alcohol abuse, and other issues that affect young people in the United States.

In Print

Crosscutting

The Self-Help Sourcebook, Your Guide to Community and Online Support Groups provides information on over 800 national groups and networks addressing issues such as abuse, addictions, bereavement, disabilities, rare illnesses, mental health, and parenting. Single copies cost \$10, plus \$2 postage and handling. For five or more copies, call (973) 625-7101 about bulk rates. To order, write American Self-Help Clearinghouse, Attn:

Self-Help Sourcebook, Northwest Covenant Medical Center, Denville, NJ 07834-2995. For more information, call (973) 625-9565 or visit www.cmhc.com/selfhelp.



The *Journal of Health Communication* has relocated its offices to the Academy for Educational Development, 1255 23rd Street, NW., Washington, DC 20037. The journal has added an "education and evaluation" section. Visit www.aed.org/JHealthCom.

Educational and Community-Based Programs

Information on government and private agencies that serve homeless people appears in the **1998 Health Care for the Homeless Directory.** The directory costs \$10.50 per copy. To order, write to Health Care for the Homeless Information Resource Center, Policy Research Associates, Inc., 262 Delaware Avenue, Delmar, NY 12054. For more information, call (888) 439-3300, ext. 246; e-mail hch@prainc.com; or visit www.prainc.com/hch.

Occupational Safety and Health

The American College of Occupational and Environmental Medicine (ACOEM) has issued its first **inventory of competencies in 26 categories of occupational**

medicine. For a copy of the list, write ACOEM, 55 West Seegers Road, Arlington Heights, IL 60005; visit www.acoem.org; or e-mail kcoyne@acoem.org.

Older Adults

The fourth edition of the **Alzheimer's Education and Training Research Catalog** is now available, featuring more than 150 publications and videos related to Alzheimer's disease. For more information, write Geriatric Resources at P.O. Box 239, Radium Springs, NM 88054-0239; call (800) 359-0390; or e-mail GRI@zianet.com.

On Video

Substance Abuse

A new video, "**Red Ribbon Week: Working Toward a Drug-Free School and Community**," highlights various Red Ribbon Week activities. Red Ribbon Week calls attention to alcohol-impaired driving by encouraging people to tie red ribbons to their cars as a reminder not to drink and drive. The video is useful in planning Red Ribbon Week for grades 2 through 8. To purchase the video for \$49.50, write to The Bureau For At-Risk Youth, P.O. Box 760, Plainview, NY 11803-0760, or call (800) 99-YOUTH.

Violent and Abusive Behavior

The fall 1998 *At-Risk Resources Buyer's Guide* is now available, featuring "**Cancelled Lives: Letters From the Inside**," three videos designed to deter

adolescents from violence and crime by showing what incarceration is really like. To request a free *At-Risk Resources Buyer's Guide*, write to The Bureau For At-Risk Youth, P.O. Box 760, Plainview, NY 11803-0760, or call (800) 99-YOUTH.

In Funding

Environmental Health

A new University of Washington **research center focusing on children's health risks from pesticide exposure** will be supported by a 5-year, \$6.6 million award from the Environmental Protection Agency and the National Institute of Environmental Health Sciences.

HIV

HHS is adding \$4.9 million to supplement **HIV/AIDS prevention and outreach services in racial and ethnic minority communities**. The Centers for Disease Control and Prevention and the Health Resources and Services Administration are providing the funds.

The National Institute of Allergy and Infectious Diseases, along with five other NIH Institutes, has awarded over \$13 million for first-year funding for 12 **Centers for AIDS Research (CFARs)** across the United States.

Educational Aids

Substance Abuse

The Substance Abuse and Mental Health Services Administration has launched a new campaign to **help children and young adults avoid substance abuse**. To order four information guides, a poster, a resource guide, and other free products, call (800) 729-6686 or visit www.health.org.



STATE ACTION

States are laying the foundation for their 2010 objectives. Through audio conferences and at Healthy People 2010 regional hearings, States are sharing their successes and challenges with the year 2000 objectives.

At the Philadelphia Healthy People 2010 regional meeting, panelists from New Jersey, Maryland, and Vermont presented their experiences. For its year 2000 effort, New Jersey identified 69 measurable objectives in 11 priority areas. A sample progress report in the areas of AIDS, lung cancer, and cardiovascular disease was presented.

Maryland is working on its health improvement plan, targeting improved communication between

public health and health care financing, increased access and use of preventive services, revitalized infrastructure, science-based decisionmaking, and increased private sector partnerships.

Vermont has found success through health objectives that are understandable to the public, measurable, and outcome oriented. *Healthy Vermonters 2000* is widely regarded as the blueprint for health improvement in Vermont. Its logo has been used widely in various marketing efforts.

Ten States were featured in five audio conferences. Iowa launched its 2010 planning on October 30. A second "barn raising" is planned for June 1999, and the release of Healthy Iowans

2010 is slated for the year 2000. West Virginia is forming a statewide steering committee with a 2010 summit meeting planned in the summer of 1999. Both North and South Carolina involve local community coalitions in their planning. Colorado and Maine have integrated health targets into their State budgets.

California reported the successful use of data to support local objectives tracking. Finally, Kansas and New Jersey have used public opinion polling to shape their health priorities and to target their plans.

Many States are posting their 2010 objectives development activities on the Internet. To continue to facilitate the exchange of information, the next issue of *Consortium Exchange* will feature these web sites.

ETCETERA

On October 2, 1998, the President's Food Safety Council held a public meeting to launch an effort to develop a comprehensive strategic Federal food safety plan. The meeting provided an opportunity for public input into a long-term vision for food safety in the United States and identified a strategic planning process, goals, and crucial steps, as well as potential barriers to achieving that vision.

On August, 25, 1998, the President issued Executive Order 13100 establish-

ing the President's Food Safety Council to improve the safety of the food supply through science-based regulation and well-coordinated inspection, enforcement, research, and education programs. The Council is responsible for developing a long-range strategic plan that can be used to set priorities, improve coordination and efficiency, identify gaps in the current system and how to fill those gaps, enhance and strengthen prevention and intervention strategies, and identify mea-

asures to show progress. In developing the plan, the agencies will consider the conclusions and recommendations of the National Academy of Science's report *Ensuring Safe Food from Production to Consumption*, the review of Federal food safety research, and the research plan being developed by an interagency working group.

The food safety agencies took the first step in the strategic planning process by drafting a statement encompassing the agencies'

vision for the U.S. food safety system and the roles of all those involved. A *Federal Register* notice was published in September 1998 announcing a strategic planning process, beginning with a discussion of the vision statement, that involves all interested parties. The October 2 meeting was the first of several scheduled meetings, including Sacramento, California, on October 20; Chicago, Illinois, on November 10; and Dallas, Texas, on December 8.



The mission of the Office of Disease Prevention and Health Promotion (ODPHP) is to provide leadership for disease prevention and health promotion among Americans by stimulating and coordinating Federal activities. *Prevention Report* is a service of ODPHP.

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"LET YOUR VOICE BE HEARD"

says Surgeon General David Satcher.

Comment on *Healthy People 2010*

Objectives: Draft for Public Comment at

<http://web.health.gov/healthypeople/>